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Mar 20 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K99009 (8)
1. Corporation Name
RURAL LAND COMPANY, INC.



Principal Place of Business: 3021 NW 30TH TER GAINESVILLE FL 32605
Mailing Address: 3021 NW 30TH TER GAINESVILLE FL 32605-2776

3. Date Incorporated or Qualified: 06/28/1989
3a. Date of Last Report: 03/06/1996
4. FEI Number: 59-2956279
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21. 8090 AIA South, Suite Apt. #, etc. Unit 407, City & State: St Augustine, FL, Zip: 32086, Country: St. Johns
2a. Mailing Address: 26. 8090 AIA South, Suite Apt. #, etc. Unit 407, City & State: St Augustine, FL, Zip: 32086, Country: St. Johns

9. Name and Address of Current Registered Agent
GANO, CHARLES P.
3021 NW 30TH TER
GAINESVILLE FL 32605

10. Name and Address of New Registered Agent
81. Name: Charles P. Gano
82. Street Address (P.O. Box Number is Not Acceptable): 8090 AIA South, Unit 407
83. City: St Augustine, FL, 85. Zip Code: 32086

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Charles P. Gano CHARLES P. GANO DATE: 03-17-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
FILE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GANO, CHARLES P.	1.2 NAME	
STREET ADDRESS	3021 NW 30TH TER	1.3 STREET ADDRESS	8090 AIA South, Unit 407
CITY-STATE-ZIP	GAINESVILLE FL	1.4 CITY-STATE-ZIP	St. Augustine FL 32086
FILE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GANO, ANNIE M.	2.2 NAME	
STREET ADDRESS	3021 NW 30TH TER	2.3 STREET ADDRESS	8090 AIA South, Unit 407
CITY-STATE-ZIP	GAINESVILLE FL	2.4 CITY-STATE-ZIP	St. Augustine FL 32086
FILE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
FILE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
FILE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
FILE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: Charles P. Gano CHARLES P. GANO DATE: 03-17-97 (904) 460-9419

CR2E034 (9/96)